

## Congresswoman Stephanie Herseth Sandlin

## **INTERNSHIP APPLICATION**

Date:	Social Security Number:					
Name:						
(Last)	(First)	(MI)				
Present Address, City, State and Zip Code:						
Present Phone #:	E-mail:					
Parent's Name:	Parent's Phone:					
Parent's Address, City, State, and Zip Code:						
Name of High School:	Date of Graduation:					
Name of College/University:	Date of Graduation:					
Major/Minor:	Advisor Name/Phone #:					
Please rank order of preference, one through for	ur, 1 being first choice:					
Washington, D.C. Office	Sioux Falls Office Rapid City Off	ice				
Aberdeen Office						
Dates available:	Full or Part-time:					

## II. REFERENCES

relationship to	you.	umbers of three nor	n-relative references	(i.e. employers, proi	essors, etc) and tr	ieir
1						
2						
3						

## **III. ADDITIONAL INFORMATION**

Please send the following information along with this completed application:

Congresswoman Stephanie Herseth Sandlin ATTN: Intern Coordinator 326 E. 8<sup>th</sup> Street, Suite 108 Sioux Falls SD 57104

- 1. Cover Letter and Resume
- 2. Three Letters of Recommendation
- 2. Brief essay, including the following information: work experience, experience in politics/government, academic honors, awards and leadership positions, office and computer skills, why you are interested in an internship with Congresswoman Herseth Sandlin, and why you would be the best choice for an intern.

For more information, contact the intern coordinator at (866) 371-8747 or (605) 367-8371.